

SECTION IV: APPENDICES

APPENDIX A: DEFINITIONS / GLOSSARY

There are many definitions of cultural and linguistic competence and related terminology. Los Angeles County Department of Health Services offers the following definitions for the implementation of standards contained in this document.

Access: the degree to which services are readily obtainable – determined by the extent to which needed services are available, information about these services is provided, the responsiveness of the system to individual cultural and linguistic needs, and the convenience and timeliness with which services are obtained.

Back Translation: a written translation conducted by a Qualified Translator other than the original translator who translates from the target language back to the source language. If it is a complex or legal document, a Back Translation is desirable.

Cultural Awareness: the development of sensitivity and understanding of another racial/ethnic group. It usually involves changes within an individual toward others in terms of attitudes and values. Awareness and sensitivity also refer to the qualities of openness and flexibility that a person develops in relation with others. Cultural awareness must be supplemented with cultural knowledge.

Cultural Competence: a set of congruent behaviors, attitudes, policies and practices which creates and fosters an organizational culture that enables health care providers and organizations to:

- Recognize and acknowledge diverse groups within the service population;
- Understand the role of diverse values, norms, practices, attitudes and beliefs about disease, treatment and prevention in program and policy development and health services planning;
- Enhance accessibility to services to diverse groups by improving cultural and linguistic competencies and availability;
- Take a holistic view of health, inclusive of cultural health beliefs and practices, and the physical, mental and emotional aspects of diverse groups;
- Respect and support the dignity and perspective of the client, patient, family and staff, to best address the health interest of the patient;
- Ensure systems of recruitment, evaluation, staff development and retention that support an organizational culture and staff that are better able to provide health services that meet the cultural and linguistic needs of the community;
- Improve the health status of the populations and communities served.

Cultural Diversity: a constellation of people consisting of distinctive ethnic groups, colors and races, languages, customs, styles, values, beliefs, gender, ages, education, knowledge, skills, abilities, functions, practices, religions, socioeconomic status, sexual orientation and geographic areas.

Cultural Responsiveness: A measure of the knowledge, skill and sensitivity of healthcare professionals and their organizations to become aware of the individual and systemic needs of culturally diverse populations, and their subsequent receptivity and openness in developing, implementing and evaluating culturally-appropriate individual and institutional responses to these needs. (California Standards for Healthcare Interpreters, CHIA, 2002)

Cultural Sensitivity: recognition and respect for customs and cultural norms different from one's own.

Culture: the shared values, traditions, norms, customs, arts, history, folklore, and institutions of a group of people. Culture is a vital factor in both how clinicians deliver services and how patients respond to medical services and preventive interventions. Culture is determined not only by ethnicity but by factors such as geography, age, language, religion, gender, sexual orientation, physical ability and socioeconomic status.

Department of Health Services (DHS) Entities: includes DHS in-patient and outpatient facilities, programs, Public Private Partners (PPPs) and other contracting entities.

Department of Health Services (DHS) facilities and programs: DHS hospitals, comprehensive health centers, public health centers and public health programs.

Interpreter, qualified: A qualified healthcare interpreter is one who has, 1) been trained in healthcare interpreting, 2) adheres to the professional code of ethics and protocols of healthcare interpreters (such as CHIA's California Standards for Healthcare Interpreters), 3) is knowledgeable about medical terminology, and 4) can accurately and completely render communication from one language to another. Ideally, a qualified healthcare interpreter will have been tested for their competency in the languages in which they interpret. A healthcare interpreter may include a bilingual or multilingual provider or medical staff. Minor children are disqualified from being considered an interpreter because they lack the interpreter training, skills, vocabulary, and maturity, and are therefore ethically inappropriate to be given the responsibility for the task of healthcare interpreting, except in extremely rare emergency situations.

Interpreting: involves conveying both the literal meaning and connotations of spoken and unspoken communication (e.g. body language, mannerisms) from one language into another to the health practitioner and the patient. *(CHIA: The process of understanding and analyzing a spoken or signed message and re-expressing that message faithfully, accurately and objectively in another language, taking the cultural and social context into account (ASTM, 2000). The purpose of interpreting is to enable communication between two or more individuals who do not speak each other's languages.)*

Interpretation: While the two words have the same meaning in the context of oral/signed communication, the term interpreting is preferred, because it emphasizes process rather than product and because the word interpretation has so many other uses outside the field of translation and interpreting. (National Council on Interpreting in Health Care)

Limited English Proficient (LEP): an LEP individual is a person who is unable to speak, read, write or understand the English language at a level that permits him/her to interact effectively with health and social service agencies and providers.

LEP Administrator: a designated administrator at each facility and program responsible for managing limited and non-English speaking services, issues and resources.

Linguistic Competency: the health care organization's ability to provide its non and limited English speaking patients with timely, accurate and confidential interpretation services, and quality, culturally appropriate translated materials; a key component of cultural competency.

Multicultural: consisting of cultural characteristics representative of one or more ethnic groups. Multicultural individuals may acquire the norms, attitudes and behavior patterns of their own and one or more ethnic and/or cultural groups.

Public Private Partners (PPPs): Private, community-based clinics the County contracts with to provide primary care and some specialty services in order to expand access to ambulatory care for uninsured patients under the 1115 Waiver.

Preferred Language: refers to the language an individual is most proficient in and uses most frequently to communicate with others inside and outside the family system.

Qualified Translator: One who is able to read, write, and understand both the target language(s) and English; has had training in medical interpreting and translation, has knowledge of medical terminology, and has knowledge and experience with the culture(s) of the intended audience.

Register: A speaker's pronunciation and choice of vocabulary and grammar which contribute to the speaker's perceived level of literacy, education or social class. Register is also a component of readability in written documents; translations should be in the identical register of the original, including vocabulary and complexity of ideas and sentence structure.

Sight translation: The process of a qualified interpreter reading a document written in one language, and orally describing the content of the document in the language of the patient or the clinician.

SPA: Service Planning Area. Eight (8) geographic regions for planning, information-sharing and data gathering were agreed upon to move towards more integrated and comprehensive services across Los Angeles County. In 1993, the Board of Supervisors adopted these 8 SPAs as a framework for cross-agency, cross-jurisdictional planning for children and families. *(See Appendix I, page 55)*

Threshold Language: A language that meets Medi-Cal qualifications for translation under the Kopp Act (Health and Safety Code 1259). Current Medi-Cal regulations require services and information to be provided in the person's primary/preferred language if the person is in a mandatory Medi-Cal eligible population of 3,000 in a proposed Service Area (L.A. County) or 1,000 in a single ZIP code or 1,500 in two contiguous ZIP codes. According to the California Department of Health Services, Medi-Cal Managed Care Division, the threshold languages for Los Angeles County are: Armenian, Chinese, English, Khmer (Cambodian), Russian, Spanish and Vietnamese. *(See Appendix K, on page 62, for a comparison of threshold languages in California Counties)*

Translation: The rendering, in writing, of a written text from one language into a written text in a second language. Accuracy is often checked on a translation's accuracy by having a second qualified translator "back translate" the translated document into the original language (English), for comparison with the original document. In this document, the standard for complex documents is that a qualified translator will simply "check" the accuracy of complex translations.

Transparency, or Transparent interpreting: The idea that the interpreter keeps both parties in the interpreting session fully informed of what is happening, who is speaking, and what the interpreter is doing, is known as "transparency." Whenever interpreters intervene by voicing their own thoughts and not the interpreted words of one of their clients, it is critical that they ensure that a) the message is conveyed to all parties and b) everyone is aware that the message is from the interpreter. (as for example, "...the interpreter would like to say,...") (CHIA)